## New Jersey Public Employment Relations Commission NON-POLICE AND FIRE ECTIVE NEGOTIATIONS ACREEMENT SUMMARY FOR

## COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM

Line	#	·					
	SECTION I: Parties	and Term of Contr	acts				
1	Public Employer: To	loyer: Township of Hopewell		County: Mercer			
2	Employee Organization	ization: AFSCME		Number of Employees in Unit:			
3	Base Year Contract Te	o1/01/2016	POROCIA - Maria - Maria - Delegi de Septembro - Maria	New Contract Term: 12/31/2018			
	SECTION II: Type o	f Contract Settlem	ent (please check o	only one)			
4		Contract settled without neutral assistance					
5	Contract set	tled with assistance o	of mediator				
6_	Contract set	tled with assistance o	of fact-finder	***************************************			
7	and the same of th	led with assistance o				TE AND A CONTRACT	
8	If contract was settled			report with recomm	mandations?		
	Yes No No		are race ringer issue	a report with recom	nendadons:		
	SECTION III: Salary	Base					
	The salary base is the the parties negotiate	cost of salaries in the the salary increases.	e final year of the ex	pired or expiring agre	eement. This is the	base cost from which	
9		Salary Costs in Base Year \$1,119,618.66					
10	Longevity Costs in Base Year \$27,498.19						
11	Total Salary Base \$ 1,147,116.			25500000000000000000000000000000000000			
	SECTION IV: Salary	Increases for Each	Year of New Agre	ement*			
	=66 =	Year 1	Year 2	Year 3	Year 4	Year 5	
12	Effective Date (month/day/year)	07/01/2016	01/01/2017	01/01/2018	PE WAS CHILDREN	Name of the Control o	
13	Cost of Salary				age (100 to 100 to		
14	Increments (\$) Salary Increase Above Increments (\$)	43,616.56	22,736.18	23,190.91		COLOR Concession in the Color	
15	Longevity Increase (\$)	1.81	2,000.00	3,500.00	gentler filt in 2004 of 6-2-40 ficknessen, 2020 field in 2004 order in 2020 statement in 2020 statemen	g demokratica in de de calacteria de de la lacementa de Sacrémento de calacteria de la lacementa de la calacteria de la lacementa de la calacteria de la calact	
16	Total \$ Increase (sum of lines 13-15)	43,618.37	24,736.18	26,690.91	Annual Control of the		
17	New Salary Base (\$)	1,190,735.2	1,215,471.4	1,242,162.3	generalises de medicadoril de la lacaza de proprio de partir da en como en la constanti de la lacaza de la como en la constanti de la lacaza de la como en la constanti de la lacaza de la constanti de la lacaza de la como en la constanti de la lacaza de la como en la constanti de la lacaza de la como en la constanti de la lacaza de la como en la constanti de la lacaza de la como en la constanti de la lacaza de la como en la co	gadinahadik kecenda di Marakhada katan 1990 di dipandik Libusa secenduk di di Marahadik kecenda di	
18	Percentage increase over prior year	3.8 %	2.1 %	2.2 %	%	# Market   M	
	*If contract duration i	is longer than five yed	ars, please add an ad	lditional page.			

## SECTION V: Increases in Other Contractual Economic Items or Newly Added Economic Items\*

19	Item Description	Base Year Cost (\$)	Year 1 Increase (\$)	<i>Year 2</i> Increase (\$)	<i>Year 3</i> Increase (\$)	<i>Year 4</i> Increase (\$)	Year 5 Increase (\$)
	Uniform	16,275	525.00	0.00	525.00		grafine de la cincia de cardo de la como de la del de mente de la cincia de monero de la cincia del la cincia de la cincia de la cincia de la cincia del la
	* connectional circuit in the Contract of the				Section Commission Com		
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20	Totals(\$):	16,275.00	525.00	0.00	525.00		

<sup>\*</sup>If contract duration is longer than five years, please add an additional page.

	SECTION VI: Medical Costs		
		Base Year	Year 1
21	Health Plan Cost	<b>\$</b> 371,029.08	\$ 398,362.44
22	Prescription Plan Cost	\$ 113,178.84	\$ 126,335.40
23	Dental Plan Cost	\$ 15,443.76	\$ 16,614.12
24	Vision Plan Cost	\$	S The state of the
25	Total Cost of Insurance	\$ 499,651.68	\$ 541,311.96
26	Employee Insurance Contributions	\$ 70,193.60	\$ 79,917.29
27	Employee Contributions as % of Total Insurance Cost	14.05	<sub>6</sub> 14.76 %

Page 2 of 3 (complete all pages)

mpl	oyer: Township of	f Hopewell	Employee Organization:	AFSCME	Page 3
ecti	on VI: Medical Co	osts (continued)			
28	Identify any in	surance changes that	were included in this CNA.		
beir	e insurance prov ng for specialist	vider remained the s. The employee	e same but the copay's wes could buy-up to their old /25 (generic/brand)	ere increased to \$2 d plan at their own o	20/\$30 with \$30 cost. Prescription
	SECTION VII: C	ertification and Sign	nature		V 41 q - c
9	Print Name:	Elaine Borges	oregoing figures are true:	ė	
	Position/Title:	CFO			
	Signature:	Olaine 1	Sorges		
	Date:	3/10/17			
	Send this comp form to: <u>contra</u>	pleted and signed for acts@perc.state.nj.u	rm along with an electronic co	py of the contract and	I the signed certificatio
	NJ Public Emplo	pyment Relations Cor	mmission		
	Conciliation and				
	PO Box 429				

Revised 8/2016

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